

**35 Financial institution tax return****2005**

For the calendar year January 1 through December 31, 2005

Name of financial institution

Mailing address

City

State

Zip code

Phone number

FEIN

-

Date of incorporation

/ /

Check only if applicable:

☐ Extension ☐ Short period ☐ Amended**Computation of tax liability**

See tax booklet for complete instructions

Round off to dollars

1 Federal taxable income Check appropriate box: ☐ Single Entity Method ☐ Combined Report Method ----- 1

2 Total additions (from Schedule SA, line 8) ----- 2

3 Total subtractions (from Schedule SA, line 16) ----- 3

4 North Dakota apportionable income (Add lines 1 and 2, then subtract line 3 from the result) ----- 4

5 Apportionment factor (from Schedule FACT, line 19) ----- 5

6 Income apportioned to North Dakota (Multiply line 4 by line 5) ----- 6

7 Nonbusiness income allocated to North Dakota ----- less related expenses ----- 7

8 North Dakota income (Add lines 6 and 7) ----- 8

9 Federal income tax deduction (from Schedule FTD, line 19) ----- 9

10 Subtotal (Subtract line 9 from line 8) ----- 10

11 Renaissance zone income exemption (from Schedule RZ, part 6, line 1) ----- 11

12 North Dakota net operating loss carryover from prior year (Submit worksheet) ----- 12

13 Balance (Subtract lines 11 and 12 from line 10) ----- 13

14 Deduction for federal alternative minimum tax disallowed (from Schedule AMTB, line 11) ----- 14

15 North Dakota taxable income (Subtract line 14 from line 13) ----- 15

16 Financial institution tax: multiply line 15 by 7% (.07) MINIMUM OF \$50.00 ----- 16

17 Total tax credits (from Schedule TC, line 4) ----- 17

18 Balance (Subtract line 17 from line 16; if less than \$50.00, enter \$50.00) ----- 18

19 State general fund portion of tax: multiply line 18 by 2/7 (.285714) ----- 19 State General Fund

20 Financial institution distribution fund portion of tax: multiply line 18 by 5/7 (.714286) ----- 20 Financial Institution Distribution Fund

21 Credit for contributions to nonprofit private colleges ----- 21

22 Credit for contributions to nonprofit private high schools ----- 22

23 Credit for contribution to Rural Leadership ND scholarship tuition program ----- 23

24 Net tax liability (Subtract lines 21, 22, and 23 from Line 19; enter amount from line 20) ----- 24 (minimum \$14.00)

**IMPORTANT** If this is an amended return, skip lines 25 through 29, and complete lines 30 through 35. Due April 15, 2006

25 Prepaid tax (Enter amount, if any, paid with Payment Voucher, Form 35PV) ----- 25 (minimum \$36.00)

26 Tax due (If line 24 is greater than line 25, subtract line 25 from line 24) ----- 26 Due January 15, 2007

27 Penalty and interest (Submit worksheet) ----- 27 See instructions for payment information.

28 Payment due (Add lines 26 and 27; enter -0- if less than \$5.00) ----- 28

29 State general fund overpayment to be applied to financial institution distribution fund portion of tax (If line 24 is less than line 25, subtract line 24 from line 25) ----- 29

**Amended return only**

30 Net tax liability on original return (or most recent amended return, if applicable) ----- 30

31 Tax due (If line 24 is greater than line 30, subtract line 30 from line 24) ----- 31

32 Overpayment (If line 24 is less than line 30, subtract line 24 from line 30) ----- 32

33 Penalty and interest (Submit worksheet) ----- 33

34 Payment due (Add lines 31 and 33; enter -0- if less than \$5.00) ----- 34

35 Refund (Add lines 32 and 33; enter -0- if less than \$5.00) ----- 35

If payment is to be made by Electronic Funds Transfer, check this box ☐ and enter date of payment \_\_\_\_/\_\_\_\_/\_\_\_\_

I declare under the penalties of North Dakota Century Code § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Date signed

Signature of officer

Title

Date signed

Signature of preparer

Address of preparer

Please  
Do Not  
Write  
In This  
Space



Name of financial institution

FEIN

		-							
--	--	---	--	--	--	--	--	--	--

**Schedule WW: Combined report method**

- 1 Taxable income from consolidated Federal Form 1120, line 30 or income from Federal Form 1120S, Schedule K, line 17e 1
- 2 Less: Federal taxable income of non-unitary corporations included in line 1 *(Submit worksheet)* 2
- 3 Balance *(Subtract line 2 from line 1)* 3
- 4 Taxable income not included on line 1 from unitary corporations required to file a federal income tax return *(Submit worksheet)* 4
- 5 Book income *(before income taxes)* of unitary foreign corporations *(Submit worksheet)* 5
- 6 Optional: Book to tax reconciliation for unitary foreign corporations *(Submit worksheet)* 6
- 7 Federal taxable income *(before income taxes)* of unitary I.R.C. § 936 possession corporations, income from unitary interest charge DISC, and income from unitary Foreign Sales Corporations *(Submit worksheet)* 7
- 8 Less: Intercompany eliminations for members of the unitary group *(Submit worksheet)* 8
- 9 Total income *(Add lines 3 through 7, then subtract line 8; enter this amount on page 1, line 1)* 9

**Schedule SA: Statutory adjustments****Additions**

- 1 Federal net operating loss deduction *(from Federal Form 1120, line 29a or Federal Form 1120-A, line 25a)* 1
- 2 Special deductions *(from Federal Form 1120, line 29b, or Federal Form 1120-A, line 25b)* 2
- 3 All taxes, including franchise and privilege taxes, measured by income deducted on federal income tax return 3
- 4 Interest income from state and local government obligations 4
- 5 Federal charitable contributions deduction on federal income tax return 5
- 6 Bad debt reserve deduction under I.R.C. § 585 *(Building and loan or savings and loan association only)* 6
- 7 Dividends received from a federal reserve bank that are not subject to federal tax 7
- 8 Total additions *(Add lines 1 through 7; enter this amount on page 1, line 2)* 8

**Subtractions**

- 9 Bad debt deduction *(See instructions for amount to enter; building and loan or savings and loan associations only)* 9
- 10 Adjustment for I.R.C. § 593(g) 10
- 11 Expenses related to income exempt from federal income tax and subject to North Dakota tax 11
- 12 Wages and salaries not deductible for federal income tax purposes under I.R.C § 280C(a) 12
- 13 Recomputed federal charitable contributions deduction 13
- 14 Allocable income \_\_\_\_\_ less related expenses \_\_\_\_\_ 14
- 15 Other income included in federal taxable income that is exempt from North Dakota tax under federal or North Dakota law or constitutional provisions 15
- 16 Total subtractions *(Add lines 9 through 15; enter this amount on page 1, line 3)* 16

See tax booklet for complete instructions



Name of financial institution

FEIN

		-							
--	--	---	--	--	--	--	--	--	--

**Schedule FACT: Apportionment factor**

See tax booklet for complete instructions

**Property factor**

	Total	North Dakota	Factor North Dakota divided by Total (6-digit decimal)
1 Buildings and other fixed depreciable assets ----- 1	_____	_____	
2 Land ----- 2	_____	_____	
3 Inventories ----- 3	_____	_____	
4 Loans ----- 4	_____	_____	
5 Credit card receivables ----- 5	_____	_____	
6 Other assets (Submit worksheet) ----- 6	_____	_____	
7 Rented property (Annual rental capitalized x 8) ----- 7	_____	_____	
8 Total property (Add lines 1 through 7) ----- 8	_____	_____	_____

**Payroll factor**

9 Wages, salaries, commissions, and other compensation ----- 9 \_\_\_\_\_

**Receipts factor**

Method of determining amount of income from investment/trading assets and activities included in numerator of receipts factor.

(Check one)

☐ Method 1 - Average value method☐ Method 2 - Gross income method

10 Rentals and subrentals ----- 10	_____	_____	
11 Interest (Including fees or penalties in the nature of interest) ----- 11	_____	_____	
12 Net gains from sales and exchanges (Submit worksheet) ----- 12	_____	_____	
13 Dividends ----- 13	_____	_____	
14 Loan servicing fees (Submit worksheet) ----- 14	_____	_____	
15 Other (Submit worksheet) ----- 15	_____	_____	
16 Throwback receipts ----- 16	_____	_____	
17 Total receipts (Add lines 10 through 16) ----- 17	_____	_____	_____
18 Sum of factors (Add the factors on lines 8, 9, and 17) ----- 18	_____	_____	_____
19 Apportionment factor (Divide line 18 by the number of factors having an amount greater than zero in the Total Column for lines 8, 9, and 17; enter the apportionment factor from this line on page 1, line 5) ----- 19	_____	_____	_____



FEIN

		-						
--	--	---	--	--	--	--	--	--

**See tax booklet for  
complete instructions**

- |    |  |    |    |  |
|----|--|----|----|--|
| 1  | Federal income tax liability   |    | 1  |  |
| 2  | Federal alternative minimum tax disallowed:  |    |    |  |
|    | a Total alternative minimum taxable income adjustments (Submit worksheet)  | 2a |    |  |
|    | b 75% of ACE adjustments (Submit worksheet)  | 2b |    |  |
|    | c Total adjustments (Add lines a and b)  | 2c |    |  |
|    | d Federal alternative minimum taxable income (Submit Federal Form 4626)  | 2d |    |  |
|    | e Ratio (Divide line c by line d)  | 2e |    |  |
|    | f Federal alternative minimum tax (from Federal Form 1120, Schedule J)   | 2f |    |  |
|    | Federal alternative minimum tax disallowed (Multiply line e by line f)   |    | 2  |  |
| 3  | Adjusted federal income tax liability (Subtract line 2 from line 1)  |    | 3  |  |
| 4  | Unitary financial institution(s) federal income tax liability (Submit worksheet)   | 4  |    |  |
| 5  | Profit companies federal income tax liability (Submit worksheet)   | 5  |    |  |
| 6  | Ratio (Divide line 4 by line 5; may not exceed 1.000000)   |    | 6  |  |
| 7  | Financial institution(s) share of adjusted federal income tax liability (Multiply line 3 by line 6)  |    | 7  |  |
| 8  | Federal taxable income (Submit worksheet if using the combined report method)  | 8  |    |  |
| 9  | Income not taxable to North Dakota   | 9  |    |  |
| 10 | Balance (Subtract line 9 from line 8)  | 10 |    |  |
| 11 | Ratio (Divide line 10 by line 8; may not exceed 1.000000)  |    | 11 |  |
| 12 | Federal income tax on portion of federal taxable income reportable to North Dakota (Multiply line 7 by line 11)  |    | 12 |  |
|    | <b>Financial institutions using the combined report method and claiming a federal foreign tax credit on the federal consolidated return, skip line 13 and complete lines 14 through 19 (unless otherwise instructed on lines 15, 16 and 17).</b> |    |    |  |
|    | <b>All other financial institutions must complete line 13, skip lines 14 through 18, and complete line 19.</b>   |    |    |  |
| 13 | North Dakota apportionment factor (from page 1, line 5)  |    | 13 |  |
| 14 | North Dakota income (from page 1, line 3)  | 14 |    |  |
| 15 | Total income (Complete worksheet in instructions on page 9)  | 15 |    |  |
|    | If zero or less, skip line 16 through 18 and go to line 13   |    |    |  |
| 16 | Income relating to federal foreign tax credit  | 16 |    |  |
|    | If zero or less, skip line 17 and 18 and go to line 13   |    |    |  |
| 17 | Income relating to federal income tax paid (Subtract line 16 from line 15)   | 17 |    |  |
|    | If zero or less, skip line 18 and go to line 13  |    |    |  |
| 18 | Federal income tax ratio (Divide line 14 by line 17; may not exceed 1.000000)  |    | 18 |  |
| 19 | Federal income tax deduction (Multiply line 12 by either line 13 or line 18; enter this amount on page 1, line 9)  |    | 19 |  |

**See tax booklet for  
complete instructions**

- |   |   |    |       |
|---|---|----|-------|
| 1   | 2005 federal alternative minimum tax disallowed (from Form 35, Schedule FTD, line 2)  | 1  | _____ |
| 2   | Ratio (from Form 35, Schedule FTD, line 6)  | 2  | _____ |
| 3   | Multiply line 1 by line 2   | 3  | _____ |
| 4   | Ratio (from Form 35, Schedule FTD, line 11)   | 4  | _____ |
| 5   | Multiply line 3 by line 4   | 5  | _____ |
| 6   | Ratio (from Form 35, Schedule FTD, line 13 or line 18, whichever applies)   | 6  | _____ |
| 7   | Multiply line 5 by line 6   | 7  | _____ |
| 8   | Carryforward of prior federal alternative minimum tax disallowed (Enclose worksheet)  | 8  | _____ |
| 9   | Total federal alternative minimum tax disallowed (Add lines 7 and 8)  | 9  | _____ |
| <b>Financial institutions claiming a federal credit for prior year minimum tax on the 2005 federal return complete lines 10-12. Other financial institutions enter the amount from line 9 on line 12.</b> |   |    |       |
| 10  | Enter amount from Form 35, page 1, line 13  | 10 | _____ |
| 11  | If line 10 is zero or less, enter -0- here and on Form 35, page 1, line 14; otherwise, enter the smaller of line 9 or 10 on this line and on Form 35, page 1, line 14 | 11 | _____ |
| 12  | Available carryforward of federal alternative minimum tax disallowed (Subtract line 11 from line 9)   | 12 | _____ |



Name of financial institution

FEIN

		-							
--	--	---	--	--	--	--	--	--	--

**Schedule TC: Tax Credits****See tax booklet for complete instructions**

- 1 Credit for investment in ND Small Business Investment Company ----- 1 \_\_\_\_\_
- 2 Credit for investment in historic property in a renaissance zone (from Schedule RZ, part 6, line 4)  
(Submit a copy of Schedule RZ) ----- 2 \_\_\_\_\_
- 3 Credit for investment in a Renaissance Fund (from Schedule RZ, part 6, line 5) (Submit a copy of Schedule RZ) ----- 3 \_\_\_\_\_
- 4 Total tax credits (Add lines 1 through 3; enter this amount on page 1, line 17) ----- 4 \_\_\_\_\_

**Questions****The following questions must be answered:**

- 1 Has the IRS issued a final determination which affects any previously filed North Dakota return? ----- 1 ☐ Yes ☐ No
- 2 If the answer to the above question is yes, have all such adjustments been reported to North Dakota? ----- 2 ☐ Yes ☐ No
- 3 Does this corporation file its federal income tax return as a member of a consolidated group? ----- 3 ☐ Yes ☐ No  
If yes, enter the federal identification number under which the consolidated federal income tax return is filed. 

--	--	--	--	--	--	--	--	--	--
- 4 Is this the final North Dakota return for this financial institution? ----- 4 ☐ Yes ☐ No
- 5 Was a North Dakota corporation income tax return, Form 40, filed for the previous taxable year? ----- 5 ☐ Yes ☐ No  
If yes, enter the taxable year end date. 

		/			/				
Month			Day			Year			
- 6 Does this financial institution's federal taxable year end on a date other than December 31? ----- 6 ☐ Yes ☐ No  
If yes, enter the federal taxable year end date. 

		/			/				
Month			Day			Year			
- 7 Has this corporation changed names, been involved in a merger, reorganization or takeover during this taxable year? ----- 7 ☐ Yes ☐ No  
If so, enter the corporation's former name and attach a statement explaining the name change, merger, reorganization or takeover. \_\_\_\_\_
- 8 What type of Financial Institution is this corporation? (check one of the selections below)  
(For additional information on the definition of a North Dakota Financial Institution, please refer to N.D.C.C. § 57-35.3-01(2))

**Check only one:**

- ☐ a. Registered bank holding company
- ☐ b. National bank
- ☐ c. Savings association or federal savings bank
- ☐ d. Bank or thrift institution
- ☐ e. Trust company
- ☐ f. Foreign banking corporation
- ☐ g. Agency or branch of a foreign depository
- ☐ h. Production credit association
- ☐ i. Corporation whose voting stock is more than 50% owned by any entity described in a through h
- ☐ j. Corporation deriving more than 50% of its total gross income from finance leases
- ☐ k. Business entity deriving more than 50% of its gross income from activities that entities described in b through h and j are authorized to transact